

## **EXEMPTION REQUEST FOR REDEMPTION OF WAIVER**

Date:
Name and Address of Applicant:
Parcel/Roll Number or License:
Exemption type: Personal (Disabled/Widow/Widower)
Non-Profit Organization
(Must be submitted with application)
The application for tax exemption was filed past the March 1 deadline.  I hereby request that the waiver of tax exemption be redeemed by the Maricopa County Board of Supervisors per ARS 42-11153.
Signed,
Please return this form to:
Maricopa County Assessor's Office Exemption Division 301 W Jefferson`

Phoenix, AZ 85003